


AMENDMENT TRANSMITTAL LETTER			Docket No. 4661-0113PUS1		
Application No. 10/584,451-Conf. #4154	Filing Date January 23, 2007	Examiner J. E. Graser	Art Unit 1645		
Applicant(s): Sarman SINGH et al.					
Invention: POLYPEPTIDES FOR THE DIAGNOSIS AND THERAPY OF LEISHAMANIASIS					
MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	37	- 36 =	1	x 52.00	52.00
Independent Claims	3	- 3 =	0	x 220.00	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within first month					130.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					182.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity					
<input type="checkbox"/> No additional fee is required for this amendment.					
<input checked="" type="checkbox"/> Please charge Deposit Account No. <u>02-2448</u> in the amount of \$ <u>130.00</u> . A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-2448</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 Mark J. Muell Attorney Reg. No. 36,623			Dated: <u>September 11, 2009</u>		
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